



PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006 OMB 0651-0032

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Effective on 12/01/2004.  
pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4510).**FEE TRANSMITTAL****For FY 2005**☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 65.00

**Complete if Known**

Application Number	10/711,681
Filing Date	September 30, 2004
First Named Inventor	STRIKER et al.
Examiner Name	N/A
Art Unit	1617
Attorney Docket No.	054030-0069

**METHOD OF PAYMENT** (check all that apply)

- ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_
- ☒ Deposit Account Deposit Account Number: 07-1509 Deposit Account Name: Godfrey & Kahn, S.C.
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments.

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 20 or HP =	x	=
HP = highest number of total claims paid for, if greater than 20.		
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 3 or HP =	x	=
HP = highest number of independent claims paid for, if greater than 3.		

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Missing Parts (Declaration) \$65.00

<b>SUBMITTED BY</b>		
Signature	Registration No. (Attorney/Agent) 52,248	Telephone 608-284-2613
Name (Print/Type) Sonali S. Srivastava		Date 2-2-05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**LA FOLLETTE GODFREY & KAHN**

ATTORNEYS AT LAW  
P.O. BOX 2719  
MADISON, WI 53701-2719  
www.gklaw.com

PHONE: 608-284-2613

FAX: 608-257-0609

**FAX COVER SHEET**

DATE: February 2, 2005

PAGES (INCLUDING COVER): 9

TO: Mail Stop: MISSING PARTS  
Commissioner for Patents

FAX: 703-746-4060

FROM: Sonali S. Srivastava  
Reg. No. 52,248

This transmission is in response to a Notice of Missing Parts for the following Patent Application:

Title	:	ANTIVIRAL AGENTS AND METHODS OF USE
Application No.	:	10/711,681
Filing Date	:	September 30, 2004
Inventor	:	STRIKER et al.
Attorney Docket No.	:	054030-0069
Entity	:	Small
Examiner	:	N/A
Art Unit	:	1617

Enclosed are:

- Transmittal Form
- Fee Transmittal
- Declaration for Utility or Design Patent Application (4 Pages)
- Notice to File Missing Parts (2 Pages)

MN230043\_1.DOC

**IF YOU HAVE A PROBLEM RECEIVING THIS TRANSMISSION, PLEASE CALL US AS SOON AS POSSIBLE AT 608-257-3911.**

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LaFollette Godfrey &amp; Kahn is an office of Godfrey &amp; Kahn, S.C.



PTO/ST/21 (09-04)

Approved for use through 07/31/2006, OMB 0631-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/711,601	
	Filing Date	September 30, 2004	
	First Named Inventor	STRIKER et al	
	Art Unit	1617	
	Examiner Name	N/A	
Total Number of Pages in This Submission	8	Attorney Docket Number	054030-0100

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input checked="" type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Notice to File Missing Parts
Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Godfrey & Kahn, S.C.		
Signature			
Printed name	Sonali S. Srivastava		
Date	2-2-05	Reg. No.	52,248

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Luanne M. Connor	Date	2-2-05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Attn: William G. Smith, Director  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
(571) 272-2000

APPLICATION NUMBER	FILING OR FILING DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/711,681	09/30/2004	Robert T. STRIKER	054030-0000

31096  
GODFREY & KAHN, S.C.  
780 N. WATER STREET  
MILWAUKEE, WI 53202

CONFIRMATION NO. 5680

## FORMALITIES LETTER



\*0000000014662473\*

Date Mailed: 12/03/2004



## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

*Filing Date Granted*

## Items Required To Avoid Abandonment:

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing  
*A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.*
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.

## SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is **\$65** for a Small Entity

- \$65 Late oath or declaration Surcharge

Replies should be mailed to: Mail Stop Missing Parts  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

02/11/2005 AWONDAF1 00000064 071509 10711681

01 FC:2051 65.00 DA

*A copy of this notice MUST be returned with the reply.*

A handwritten signature in cursive script, appearing to read "Shina P", is written over a horizontal line.

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 1 - ATTORNEY/APPLICANT COPY